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ABSTRACT

In 1984 the Newberg (Oregon) School District began its Impact Program for limiting substance abuse. The program's primary purposes are to raise awareness, disseminate information, intervene when chemicals seem to be hampering success in school, refer users to treatment centers, and provide support for those returning after treatment. This report's first chapter describes the program's origin in training provided by a Portland (Oregon) hospital. Based on the premise that addiction is a treatable disease that follows a predictable pattern, the training was first offered to teachers, counselors, administrators, board members, police liaison officers, parents, and church leaders. These trainees then provided workshops and inservice programs for others. Once trained, the team members intervene in the lives of students suspected of drug abuse. Chapter 2 describes how substance abusers are identified, referred for treatment, treated, and returned to school. The third chapter describes the objectives of the Impact Program's substance abuse prevention component and its place in the district curriculum. The fourth chapter explains community involvement in the program. Appendices provide the student referral form used, a scope and sequence chart for substance abuse prevention curricula from kindergarten through the fifth grade, and a 1986 flyer describing the program. (PGD)

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Desmond J. Leatt

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Preface

Recognizing that alcohol and drug abuse are a threat to our nation's adolescents, most school administrators accept the premise that educators can and should address the drug problem. In many schools administrators have but one recourse when a student is found to be using an illegal substance: expel the student. But how can schools exercise firm discipline and at the same time come to the aid of such students, helping them to recover from substance abuse?

The complexity and magnitude of this dilemma has challenged teachers, administrators, counselors, and community leaders who have sought to design effective substance abuse programs.

In Newberg, Oregon, coordinated district action utilizing the combined resources of the schools, community leaders, and professional instructors has produced an outstanding substance abuse prevention/intervention program. This program exemplifies a sensitive, practical, and insightful approach to a serious problem in our schools.

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Philip K. Piele
Executive Secretary

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Introduction

Tauna Vandeweghe watched intently as her swimming idol sauntered to the racing block for the start of the prelims at the Olympic Games. What was he doing? He stood as if in a daze. The judges called him a second time. Eventually he took up his position. When the starter said, "Take your mark," he jumped into the water and swam half the length of the pool before realizing he was alone in the water.

The swimmer returned to his block. When the starting gun fired, he remained on the blocks and then entered the water well behind the others. A former world record holder, he ended up coming in fourth—no medals, no record, nothing.

He tested positive for drug use and was sent home from the Olympics in disgrace. A year later he was in jail for drug-related offenses.

Tauna Vandeweghe (sister of Portland Trailblazers basketball star Kiki Vandeweghe) has represented the United States in both swimming and volleyball at the Olympic Games. She was speaking to an auditorium filled with students and faculty at the Springbrook Middle School in Newberg, Oregon. Such meetings are an integral part of a multifaceted substance abuse education program that has evolved over the past three years in the Newberg School District. The purpose of this Bulletin is to describe this effort—known as the Impact Program.

Why have many school districts throughout the country in recent years begun drug abuse prevention programs similar to Newberg's? Some relevant statistics published in 1986 by the National Institute on Drug Abuse make sober reading:

- most first-time use of illegal drugs occurs before high school
- 61 percent of all high school seniors have tried one or more illegal drugs
- one out of every 20 seniors smokes marijuana daily
- one in 20 seniors drinks alcohol daily
- 40 percent have used illicit drugs in addition to marijuana
- 60,000 12-13-year-olds have tried cocaine

The preliminary results of a recent survey on drug use among Oregon

students bring these statistics closer to home. Conducted by the Oregon Department of Human Resources and published in 1986, the survey indicates that a higher percentage of high school juniors in Oregon have tried substances such as cocaine, heroin, inhalants, LSD, and marijuana than have a similar national sample of high school seniors.

What Works—Schools without Drugs, a recent publication of the U.S. Department of Education, emphasizes that "although the problems of drug use extend far beyond the schools, it is critical that our offensive on drugs centers on the schools." Educational programs focusing on awareness and prevention make a vital contribution to the ongoing fight against substance abuse.

The following chapters examine four facets of Newberg School District's substance abuse program: (1) intensive and ongoing training, (2) the process of intervention and treatment, (3) the district's curriculum for the prevention of substance abuse for grades K-12, and (4) community involvement in the program.

Chapter 1

Origin and Training of the Impact Team

The Newberg School District has an enrollment of approximately 3,900 students in kindergarten through twelfth grade. The district has five elementary schools (grades K-5), two middle schools (grades 6-8), and one high school (grades 9-12).

As in many other communities, Newberg's substance abuse program began when caring, concerned people from a variety of groups got together to do something about the growing substance abuse problem in their community. In 1984, three members of the community attended an intensive week-long training program sponsored by the Care Unit Hospital of Portland. Known as Impact, the hospital's program is designed to help schools deal with the many problems that are caused by teenage substance abuse.

To date, nearly thirty people in Newberg have received Impact training, including teachers, counselors, administrators, board members, police liaison officers, parents, and church leaders. Substantial funds contributed by members of the community have been used to sponsor the training.

Training of the Impact Team

The Impact training program at the Care Unit Hospital of Portland is based on the premise that addiction is a disease that follows a predictable pattern and that is treatable.

During the training, the Adolescent Care Unit staff members describe what happens physiologically when chemicals are introduced to the body. The training also includes counseling and interview techniques as well as training in how to identify patterns of behavior typical of substance abusers. Topics such as dependency, how emotions are affected by drug abuse, the nature of drugs, the problems of adolescents, and role of the family are discussed.

One of the most important topics in this training is the process of enabling, which occurs when others inadvertently protect students from the consequences of substance abuse. In their attempts to help, teachers

sometimes try to solve for students the problems caused by their addiction. Such behavior enables the student to avoid dealing with the problem. As Hal Stoltz, counselor at Newberg High School, remarks, "What we need to do is confront them, and part of the intervention process is to push them into a place where they have to acknowledge that their use of chemicals is interfering with the progress of their life so that they need to reach out and get some help."

Currently more people want to enter the Impact training program—it is offered four or five times a year—than can be accommodated. In the Newberg district the Impact steering committee selects applicants for the training based on why the person wants to go and what role they can play after they have been trained. The committee's goal is to have at least one Impact-trained person in each of the eight schools in the district.

Following its own training at Care Unit Hospital of Portland, Newberg's Impact Team has conducted considerable inservice training for other district personnel. For example, in April 1985 a two-day inservice training program for all school district employees was held at the Newberg High School. Designed to acquaint district staff members with the Impact Team's policy and processes, the training program covered drug awareness and education, identification, and the referral process.

The Impact Team has also participated in many public meetings to which parents, staff, and the public are invited. The commitment of the Impact Team members to educating the community has done much to provide all concerned with a deeper understanding of the process of prevention and intervention in substance abuse. The obvious caring of the leaders of the Impact Team, their enthusiasm for their task, the involvement of teachers and administrators, and the public's concern over the damage caused by drugs all have contributed to the success of Newberg's drug education program.

Purpose of Newberg's Impact Program

Hal Stoltz, one of the founders of the Newberg School District's Impact Team, summed up the primary purpose of the Impact Program in his year-end report in June 1985:

To raise the level of *awareness*, expand the base of reliable *information* upon which decisions are made, *intervene* when chemicals seem to be causing a lack of success in school, *refer to treatment* centers as deemed appropriate, and provide a *support* system for those returning from treatment and reintegrating themselves in the school. Secondary purposes include providing resources for the school and the community in terms of sharing information from training experience. Impact team members will also be involved in training other staff personnel, consulting with district curriculum committees, and presenting the Impact program to interested groups and individuals.

The schools and community of Newberg, recognizing that substance

abuse or chemical dependence is a disease, have begun a program to help students say no to drugs. Traditional action such as suspension or expulsion of students involved in substance abuse is now complemented by a program involving referral, assessment, treatment, and reintegration into the school. The backbone of this program is the process by which the Impact Team intervenes in the lives of students who are suspected of being drug abusers; this intervention process is the subject of the next chapter.

Intervention and Treatment

In an attempt to break the cycle of drug use and denial, a comprehensive process of intervention was instituted within the Newberg School District. Carefully designed forms are used to assist all staff throughout the district in identifying potential substance users. Once identified, the students follow a sensitively planned referral process that leads to counseling interviews with the parents and student, during which decisions are made regarding treatment.

Identifying Potential Substance Abusers

There is considerable agreement among the Impact Team members interviewed that the process of identifying potential substance abusers should involve the whole staff at each school. The team has designed a comprehensive form for use by the teaching staff, alerting them to observe changes in patterns of behavior, appearance, and performance.

Mary Stewart, counselor at the high school and current chairperson of the Impact Team at Newberg, points out "that team members are not trained to diagnose or treat substance abuse. We are trained to recognize behaviors."

According to Hal Stoltz, counselor at Newberg High School, some of the most important observable behavior patterns are poor class attendance, deteriorating grades (not just from Cs to Fs but also from As to Bs and Cs), failing to complete assignments, being easily distracted, exhibiting a lack of interest in school, developing a whole new set of friends, lacking motivation, being tardy, being reported as absent but seen walking around the school building, being suspended frequently, spending a lot of time with the nurse or counselor, and dropping out of sports programs.

Physical symptoms include staggering or stumbling, smelling of alcohol or marijuana, vomiting, glassy or bloodshot eyes, wearing dark glasses all the time, poor coordination, slurred speech, poor hygiene, and sleeping in class. Other indicators include involvement with illegal activities; problems with the police; possession of drugs or drug paraphernalia such as pipes, rolling papers, and small decongestant bottles; and use of incense or other types of

"coverup" scents.

Some of the things mentioned above are cause for immediate expulsion according to Newberg's substance abuse policy. Disruptive behavior, vandalism, cheating, irresponsibility, and similar antisocial behavior patterns such as those listed above may well indicate drug use.

A Planned Referral System

Since participation in the district's program is confidential, self-referrals occur occasionally. Stoltz commented, however, that "the process of denial, which is part of the disease, is the most difficult one to deal with." Those who have the problem are usually the last ones to realize or admit it. They think they can handle it and feel they are still in control. The process of falling into abuse and addiction is very subtle and the stages of addiction incremental. For these reasons, the district's referral system relies on teachers to identify potential substance abusers.

An important feature of the identification process is that once a teacher completes the student referral form it is sent to the Impact core team leaders, who meet once a week to review referrals. If the core team leaders conclude that further observations are necessary, they send a similar form to all the student's teachers with the request that the referral form be completed confidentially. The core team then meets again to discuss and review the new information supplied by the teachers.

In reviewing the teacher referral sheets, the Impact core team looks for a general pattern. The team tries to determine whether the teachers' responses reflect significant changes in the child's behavioral patterns.

Stewart stressed that the referral process is a "team process." As the core team proceeds with its evaluation of all the available information, it tries to determine whether the student needs assessment. If the answer is no, then the core team closes the referral until additional information warrants a new referral. The team usually automatically reviews such cases every two months.

This referral system for identifying potential substance abusers is in use in the Newberg School District for all students in grades K through 12. The referral form is designed to be easy to use and yet comprehensive. (A sample of this "Student Referral to Core Team" form is found in Appendix A.)

Interview with the Family

If the team decides that an assessment is necessary, a conference is set up with the parents to attempt to gain acceptance of and support for their recommendation. The hope is that the parents will agree to have their child assessed. Because of the sensitive nature of the problem and the many ramifications of the identification of a substance abuser, it is essential that

those involved in the interview process have a basic understanding of the law as it relates to chemical substance abuse. Statements made to parents must be carefully worded to avoid exposing the school to court action or liability for the cost of treatment.

Counselors begin interviews by referring to behavioral patterns observed by teachers that relate to school activities. Such observations are a legitimate concern of schools and usually can be used to draw from parents information about any changes that they have observed in their child's behavior at home. If the parents comment that they have noticed major changes at home, the counselor then gives them a questionnaire to answer. It includes such questions as "Do his/her moods change suddenly, intensely, and without provocation?" "Has he/she changed friends lately?" "Are there signs of alcohol or medicinal drugs missing from your home?" "Is your youngster disobeying instructions?" "Is there evidence of money or valuable items disappearing?"

If the parents' responses confirm that the student needs an assessment, the counselor then suggests that the student be referred to an agency for an assessment. Parents are given the names of at least three assessment agencies, which usually provide the service at no charge.

Having pointed out that the behaviors observed at school and at home could have been caused by substance abuse, it would be in everyone's interest to find out if substance abuse is really the cause and if so to proceed with treatment. This is a critical stage in the whole process because unless the parents can be convinced to follow through with an assessment the whole process will break down. As Hal Stoltz says, "This is the most sensitive single step in our whole procedure."

In most cases the student is not involved in the deliberations until the parents take him or her to an agency for assessment. At the high school, however, the counselors who are Impact trained attempt to get the students who have been referred to acknowledge that they need help by confronting them. Part of the intervention process is to place the students in a position where they have to acknowledge that their use of chemicals is interfering with their lives.

If the parents do not accept the recommendation of the Impact counselor regarding their son's or daughter's assessment, then the matter is closed in all cases except mandatory referrals, which come from administrators.

Treatment or Expulsion

Mandatory referrals normally arise when students are found in possession or under the influence of drugs or intoxicated by alcohol. In such cases the student and parents are given an alternative to immediate expulsion. (The district still considers such offenses as requiring expulsion.) If the family and the student are willing to get an assessment and the necessary treatment, the expulsion will be held in abeyance pending the student's

successful completion of treatment. Students who refuse to do this are in effect choosing to be expelled.

If the student's family accepts the core team's recommendation to proceed with treatment, the school provides the names of at least three substance abuse treatment agencies.

Normally students do not attend school while in treatment. Students who are at treatment centers during the school year, however, may receive tutoring in as many as three classes toward completion of their high school credits. In addition, as part of their program at the center, students participate in classroom instruction, lectures, group therapy sessions, health lectures, and physical education. For this work they are able to earn one elective credit per thirty days of successful treatment. After successfully completing the treatment, students are then allowed to return to school and continue their education while attending a support group.

If the treatment given by the agency is not successful, then the core team seeks alternative resources in an attempt to facilitate the desired change in the student.

Throughout the referral process the Impact Team maintains active communication with other faculty members. The core team has designed an efficient reporting system to keep the staff completely informed regarding the status of the student referral process. The excellent communication between the Impact core team, who process the student referrals, and the teaching staff ensures that the whole faculty has a sense of ownership in the implementation of the substance abuse prevention/intervention program. The cooperation of all staff members—even those who have not received Impact training—was evident in all the Newberg schools I visited.

Moreover, support by the principals and administrators is essential for such a referral process to succeed. The fact that five of Newberg's administrators, including two principals, have received Impact training is indicative of this support. My visits confirmed the notion that successful substance abuse programs in schools are dependent on the commitment of all faculty and administrators, not just those who have undergone special training programs.

Back to School after Treatment: A Support Group

The optimum time for residential treatment is about 120 days, but because the costs of such a lengthy period of treatment are prohibitive to most students, the average stay is between thirty and forty days. To provide students with the support they need after leaving a residential facility and returning to school, Impact counselors have initiated a group program at school.

Students' return to school is a critical transition. Because the treatment is offered at a residential center away from home, the student becomes part of

an environment in which everyone is completely involved in the process of getting well, learning how to stay away from drugs and alcohol, and receiving individual and group counseling. While in treatment, students literally breathe, sleep, and eat recovery; they gradually begin to feel good about themselves.

Although a student comes away from treatment with a more positive self-image, his or her peers and even teachers and counselors may not have changed their perception of the person. Unless the student's new lifestyle is supported by friends, family, and teachers, he or she can easily slip back into old ways of behavior. In addition, the students are faced with many school-related problems, including making up missed schoolwork and working to improve their attitude toward their teachers and school in general.

To provide ongoing support the Impact Program offers a class called Personal Development Support Group. Meeting first period every day, the class is taught by two Impact-trained core team members. Teachers attempt to create a reinforcing, nonjudgmental environment in which the students are encouraged and enabled to overcome their problems. Some of the objectives of the support group program are as follows:

- To help students work on problems identified in treatment
- To help students make changes in lifestyle such as how to relate to others while clean and sober
- To help students make friends and develop new relationships
- To help students deal with peer pressure to use alcohol and drugs, such as by saying no without feeling uncomfortable
- To help students deal with other school and family stresses without using mood-altering drugs
- To help students learn to take responsibility for the consequences of their personal choices and behaviors.

The students are provided with a structured learning environment that helps them to deal with "straight" people. They gain many opportunities for use of feedback, sharing, and other group and individual social skills as well as learning how to cope with everyday hassles and confrontations without turning to drugs or alcohol.

Although every effort is made to encourage students to enroll in the Personal Development Support Group after treatment, it is not mandatory. The counselors agreed that students must attend voluntarily if this support group is to function effectively. Actually, most of the students who have received treatment do enroll in the class. Enrollment is restricted to those students who have completed treatment.

The class is not only a counseling and support group but also devotes some time to academic-related issues. In addition, topics such as learning methods of self-disclosure, communication skills, understanding group processes, and developing relationship maintenance skills are covered. The

fact that a credit can be earned by attending the support group helps to motivate students to enroll and participate in the pass/fail class.

Once students enroll in the class, they must abide by its ground rules. The students sign an agreement committing themselves to the following:

- To participate in the group
- To arrive on time every day
- To stay straight
- To abide by the group's established goals and objectives
- To write their own recovery plan for their life and to establish consequences for their life goals and actions

The students may arrange to make up the work they missed in their other classes while they were in treatment. If necessary, they may also take summer classes in art or shop and take advantage of study hall periods to catch up on their school work. Some students take fewer courses the first semester after undergoing treatment so they have more time to make up missed work.

Considering the enormity of the task of reintegrating a student who has received treatment for substance abuse into a relatively normal, straight school life, the Personal Development Support Group implemented at Newberg High School does a remarkable job of addressing this critical problem.

Summary of Intervention Program Accomplishments

A review of the intervention program's work over the past two years demonstrates the depth of contribution the Impact Team has made to Newberg's youth. At the elementary school level, four referrals have led to two intervention interviews. Of twenty-eight referrals made at the middle schools, fourteen students were recommended for assessment. Of these, six were assessed and three received treatment. Referrals at the high school totaled 153, resulting in 67 students being recommended for assessment. Of these, twenty-nine were assessed and twenty-one were advised to have treatment. Thirteen students received treatment—eleven as residents, two as outpatients—and all of them participated at one time or another in the support group class.

To summarize, the Newberg Impact Team's intervention program has actively assisted many students during the past two years to overcome chemical substance abuse. Recognizing that intervention alone is clearly not a complete answer, the district has instituted a strong education and awareness program for the prevention of chemical substance abuse. To this prevention program—operating at all grade levels throughout the district—we now turn.

Program for the Prevention of Substance Abuse

The serious concern expressed by parents, educators, and community leaders about the growing substance abuse problem places the design and implementation of a program for the prevention of substance abuse as a top priority in our schools. Oregon Attorney General Dave Frohnmayer has called it a "travesty" that, although for the past twelve years Oregon law has required the state to prepare a drug and alcohol abuse curriculum for schools, no such program has ever been instituted. "We need a drug education program that works It ought to be the highest priority of every school district in the country," he said.

Parents, educators, and welfare agencies agree that once students become involved with drugs, it is difficult for them to stop. The best way to fight chemical substance abuse is to begin prevention education before the students start using drugs. Although the focus of such prevention education should be on young students, the need for education awareness programs directed at all grades is recognized.

Most schools have developed some kind of educational program that addresses the problem of chemical substance abuse. The difficulty of the task—compounded by the multidimensional nature of the problem—has challenged most schools in their quest for a solution. Districts such as Newberg, which recognized that this was a community issue and involved the community in their Impact Team from the beginning, have designed excellent prevention/awareness programs.

Objectives of a Drug Prevention/Awareness Program

In a recent article in the *School Administrator*, Michael Buscemi points to the growing health awareness movement as a fundamental shift in society's approach to health care. This movement presupposes that teaching about drug abuse must focus on health care, including getting to know your body and understanding how chemicals affect you physiologically. A substance abuse

prevention program must cover topics such as

- how drugs affect health and behavior
- increasing knowledge about drugs
- improving students' ability to make decisions regarding drugs
- providing information about resources available for help and informing students of the legal issues related to drug use
- helping to clarify students' personal attitudes about drugs
- emphasizing the positive aspects of living a drug-free life
- dealing with feelings, emotions, attitudes; getting to know oneself
- building friendships; preparing for marriage and parenting
- setting life goals, making career choices, and managing money

Translating broad educational objectives such as these into a meaningful program that becomes part of a school's curriculum is a lengthy task that requires drawing on the resources of both the school and the community. In Newberg, people from all walks of life are on the curriculum committee. Teachers, counselors, and administrators from each of the elementary, middle, and high schools all worked together with members of the community to create the substance abuse awareness program for the district.

A piecemeal approach, in which programs at the elementary, middle, and high schools are developed independently, is not likely to be very effective. To achieve a balanced, coordinated program, a systematic plan of action for all grade levels needs to be formulated. Most effective substance abuse education is cumulative, and each district is likely to have its own special emphasis. Using outside agencies and other professionals as well as school personnel will also make the program more effective.

The Newberg Substance Abuse Curriculum

A curriculum committee established by the Newberg Impact Team has designed a comprehensive curriculum program for the elementary schools. For the middle schools' substance abuse program, the committee compiled a series of worksheets. The high school follows a more flexible program implemented by the counselors.

At the elementary level the substance abuse curriculum is included in the health program, which covers emotional and physical growth. Newberg's substance abuse curriculum committee wrote a curriculum guide for K-5 that is exceptionally thorough and well planned. The committee spent a year working on the project, completing the enormous task during the summer of 1986. (The scope and sequence of the K-5 substance abuse program is included in Appendix B.)

The lessons are designed to last 15-20 minutes and be held about three

times a week. The guide includes a number of student activity sheets, which are worked individually, in small groups, or as a class depending on the topic.

A supplementary appendix to the guide covers important topics such as the history of drug use in the United States, provides descriptions of a variety of drugs, and lists possible short- and long-term effects of drug use. The guide also includes a glossary of terms related to drug use. Teachers are encouraged to add to the guide when they learn new information at workshops organized by the Impact team. This ensures that the program is continually being updated and revised.

The fact the program is being implemented throughout the district has encouraged the whole Newberg community to become involved. For example, the Impact Team has organized presentations for the local PTAs so that the parents are fully aware of what their children are being taught in the substance abuse awareness program.

In the sixth and seventh grades the drug education program is taught as part of the science curriculum, and during eighth grade it is integrated into the social studies curriculum. Topics covered include peer relationships, decision-making skills, and facts about drugs such as how they affect the body. Students learn to say no and to foster healthy habits—life skills that lead to "wellness" as well as a drug-free life. They also learn to understand the consequences of their own decision-making. Role playing exercises that help students to develop positive self-esteem are also included as part of the curriculum.

In middle schools the drug education/prevention program is conducted over a two- to three-week period during each year. Teachers also attempt to integrate the program into other parts of the school curriculum so that students see substance abuse education as a normal part of the school's curriculum. Instead of a bound guide as is used in the elementary grades, teachers in the middle schools use a set of worksheets.

At the high school the structure of the education/prevention program is more flexible. For example, during physical education Impact-trained staff may attempt to draw students into discussions about such things as

- self-concept and peer group relationships
- skills needed to learn to say no to drugs and alcohol
- how to develop trust, commitment, and loyalty
- family and intimate relationships
- how to manage and control their natural curiosity about drugs
- factual information about drugs and alcohol and how they affect one's health and body
- how to interpret misleading advertising and become sensitized to the "glamour" image of drug and alcohol use

Questionnaires developed by the Care Unit Hospital of Portland are also used in the program.

In addition, drug and alcohol units are taught in Health 1 at the ninth-grade level and in Health 2 at the junior level.

The high school has also instituted an annual Crisis Awareness Program in which Impact Team leaders as well as police liaison officers and community leaders participate in panel discussions about substance abuse. Parents, students, and members of the public are invited to attend. These forum discussions help to provide both students and the community at large up-to-date, factual information about substance abuse.

Suggestions for Program Development

The Newberg substance abuse curriculum committee—part of the Impact Team—volunteered the following suggestions to districts that are developing prevention programs:

- Use only current and valid information.
- Don't use scare tactics—they may make an initial impact but have virtually no lasting effect on future decision-making.
- Be aware that effective drug education raises questions as well as provides answers.
- The ability to think critically and to make decisions based on facts rather than opinions is a skill that can help students to make wise choices about using drugs.
- Substance abuse education is a total curriculum process involving all subjects and all grade levels.

The experience of the past two decades has highlighted the real difficulty of preventing substance abuse among young people. The emphasis today is clearly on health awareness and prevention rather than on treatment. Teaching students to say no and encouraging a healthy, drug-free lifestyle is the most effective way to fight the problem of drug use in our society.

Community Involvement

The leaders of Newberg School District's Impact Team have made it very clear that their progress toward implementing an effective substance abuse program has been greatly helped by the involvement and commitment of the whole community. In addition to school faculty, administrators, and counselors, others who have been involved from the very beginning include parents, school board members, law enforcement agencies, health services organizations, service clubs, and churches.

Impact's statement of organization stipulates that its steering committee must include representatives of the health services profession, police, school board, and community. Through this requirement the district facilitates the committee's access to resources and groups of people whose input into the program is very important. These ties have led to financial support—for example, the Kiwanis, 20-30 Club, and Rotary Club have contributed \$1,900 toward the cost of training Impact team members—and have also increased community leaders' involvement in the preparation of the substance abuse curriculum. Consequently, the Newberg community has gained a sense of ownership of the substance abuse education program. A combined effort by parents and schools is much more likely to be effective in reducing substance abuse than is an effort by the schools alone.

For this same reason the Impact Team helps to educate the community; members have spoken to nearly twenty different community organizations during the past two years in addition to giving presentations to the local PTA and speaking during special school-sponsored drug awareness programs. The Impact Team also has had a booth about substance abuse at the local community health fair.

The business world can play a valuable role in community-based substance abuse prevention programs. In addition to financial support, already evident in the Newberg District, business and industry can also provide considerable expertise. For example, business leaders can be invited to forum discussions, where students can hear how substance abuse affects employment. The Annual Crisis Awareness Program at Newberg High School that focuses on substance abuse usually includes a business leader in the panel discussions.

Understandably many teenagers look up to athletes. When speakers such as Tauna Vandeweghe speak out strongly and personally in support of campaigns to say no to drugs, they lend support at a very important level. Coaches also have an ideal opportunity to promote health awareness and substance abuse education. For this reason among others, the substance abuse prevention program at Newberg High School is part of the health education program. Sport stars who speak out for healthy living and saying no to drugs can serve as models for students.

The media can play an important role in the promotion of drug awareness education, reinforcing the effort of schools. Current campaigns to prevent drug use, such as the SAY NO to drugs campaign launched by Nancy Reagan, help to keep the issue before the public. When the rhetoric is translated into substantial state and federal funding for substance abuse education programs, then local school districts will be more able to implement effective programs. For example, allocation of funds to help the many students who cannot afford the recommended treatment period would strengthen an important part of such programs.

Conclusion

The substance abuse program in the Newberg School District attempts to deal constructively with a very complex social problem. The program's backbone is a strong Impact Team of nearly thirty people at all levels in the respective schools as well as the community who have received sound and thorough training. The Impact Team has provided an excellent basis for the district's overall initiative to combat substance abuse.

The thoroughness of the identification, referral, interview, and treatment phases of Newberg's intervention program is most impressive. Another strength of the Newberg program is the recovery support group that provides students with ongoing support.

The substance abuse education program consists of an extensive curriculum guide for grades K-5 as well as units utilized for substance awareness education at the middle schools. At Newberg High School a flexible program integrated into the physical education curriculum addresses major drug-related issues.

The involvement of the community, the obvious support of the school administrators and faculty, and the outstanding leadership of the Impact-trained team members have enabled the Newberg School District to mount an effective plan of action to deal with the problem of drug abuse.

Appendices

- A. Student Referral to Core Team Form
- B. Scope and Sequence of Newberg's Substance Abuse Curriculum Program-K-5.
- C. Flyer Describing Newberg Schools Drug and Alcohol Student Assistance Program, May 1986

NEWBERG HIGH SCHOOL
IMPACT

STUDENT REFERRAL TO CORE TEAM

It is necessary for you to take a look at your students and be a relator of actual, OBSERVABLE BEHAVIOR to a Core Team member. If a student exhibits four or five of the following, it may indicate a problem and the need for a referral. If a troubled student is going to be helped, it is necessary for a faculty member to communicate any of the observable behaviors listed below. Due process necessitates that this information, if requested, will be made available to the student or parent. Please place it in an envelope, marked confidential, and return to the Core Team box.

Student _____ Date _____

Grade _____ Person referring _____ Period _____

Check appropriate response:

- | | |
|--|--|
| <p>A. Grades</p> <p>☐ Lower grades-lower achievement</p> <p>☐ Academic failure</p> <p>☐ Falls behind in classwork</p> <p>☐ Lack of motivation, apathy</p> <p>B. School Attendance</p> <p>☐ Absenteeism</p> <p>☐ Tardies</p> <p>☐ On absence list, but in school</p> <p>☐ Suspension</p> <p>☐ Frequent schedule changes</p> <p>☐ Frequent nurse/counselor visits</p> <p>C. Extra Curricular activities</p> <p>☐ Loss of eligibility</p> <p>☐ Decreasing involvement</p> <p>☐ Dropped out</p> <p>D. Physical Symptoms</p> <p>☐ Staggering or stumbling</p> <p>☐ Smelling of alcohol or pot</p> <p>☐ Vomiting</p> | <p>E. Behavior: Criminal/Legal</p> <p>☐ Selling drugs, exchanges of money</p> <p>☐ Possession of drugs/paraphernalia</p> <p>☐ Involvement in thefts/assaults</p> <p>☐ Vandalism</p> <p>☐ Carrying weapons</p> <p>☐ Smoking</p> <p>F. Behavior: Disruptive Behavior</p> <p>☐ Defiance of rules, constant discipline problem</p> <p>☐ Cheating</p> <p>☐ Irresponsibility, blaming, denying</p> <p>☐ Verbal/physical abuse to others</p> <p>☐ Throwing objects</p> <p>☐ Obscene language, gestures</p> <p>☐ Dramatic attention-getting</p> <p>☐ Crying</p> <p>☐ Constantly in the wrong area</p> <p>☐ Extreme negativism</p> <p>☐ Hyperactivity, nervousness</p> |
|--|--|

- ___ Glassy, bloodshot eyes, dark glasses
- ___ Coordination
- ___ Slurred speech
- ___ Bad hygiene
- ___ Sleeping in class
- ___ Physical complaints
- ___ Physical injuries
- ___ Older social group
- ___ Time disoriented
- ___ Inappropriate responses/behavior
- ___ Depression
- ___ Withdrawn, loner

- G. Behavior: Atypical Behavior
 - ___ Sitting in parking lot
 - ___ Talks freely about drug use
 - ___ Avoidance of contact with others
(Student won't go to the office)
 - ___ Erratic behavior changed as
viewed on a day-to-day basis
 - ___ Change in peer group
- H. Home Problems
 - ___ Family problems
 - ___ Runaway
 - ___ Job problems
- I. Other areas, please specify

COMMENTS: (behavior precipitating this referral)

Date received _____ Assigned to _____

1.0 PROGRAM GOAL

The student will be provided information that will assist them in making responsible decisions related to substance abuse.

OBJECTIVES:	K/P	1	2	3	4	5
1.1 Explain why substances cannot be identified by taste, sight & smell.	I	D	D	D	M	M
1.2 Identify common household poisons and poison warning symbols as dangerous substances.	I	D	D	D	M	M
1.3 List substances commonly considered drugs.	I	D	D	D	M	M
1.4 Explain the reasons for asking an adult before handling or taking any medication, drug or doubtful substance.	I	D	D	D	M	M
1.5 Define the term drug as any substance that affects the way the mind and body function.	I	D	D	D	D	
1.6 Explain the physical and behavioral effects of drugs.	I	D	D	D	D	
1.7 Explain the meaning of use, misuse and abuse of drugs (including such factors as intention, moderation and responsibility).	I	D	D	D	D	
1.8 Identify reasons why people use/abuse drugs and why people do not (peer pressure, stress reduction).			I	D	D	D
1.9 Explain the meaning of directions for using and handling prescription and over-the-counter (OTC) drugs.			I	D	D	D
1.10 Identify substance abuse as a treatable condition.			I	D	D	D
1.11 Identify 3 general ways that drugs are obtained (prescription, over-the-counter, illegal).				I	D	D
(OVER)						

I = Introduce D = Develop M = Maintain

SCOPE AND SEQUENCE

OBJECTIVES:	K/P	1	2	3	4	5
1.12 Identify effects of substance abuse on the individual, family and society.					I	D
1.13 Identify resources and treatments available in the community to help people who have substance abuse-related problems or who are coping with a family member or friend with a substance abuse-related problem.					I	D
1.14 Identify factors (emotional, physical) which influence the effects of drugs on a person, including the risks of combining drugs.					I	D
1.15 Distinguish between facts and myths about drugs.					I	D
1.16 Identify different classifications of drugs (hallucinatory, stimulants, depressants).						I

TREATMENT

The following questions may be of help in the process of choosing an appropriate treatment program:

How long is treatment?

Is program State "Licensed" (for hospitals), or "Approved" (for residential or outpatient programs)?

What are the components of the treatment program?

Intervention
Family Education
Detoxification (W/Medical Supervision?)
AA or NA Meetings
Family Therapy (Trained Family Therapists?)
Aftercare

What is the staff-patient ratio?

What is expected of the parent in the treatment program?

How does the program measure its success rate? (i.e., length of abstinence, percentage who complete treatment, positive life-style changes, etc.)

How do they deal with a client/patient who has a relapse?

What is the cost of treatment:

Assessment	_____
Intervention	_____
Treatment	_____
Family Program	_____
Aftercare	_____
Detoxification	_____
Medical Services	_____
Total	_____

Be ready to discuss: Who or what program will be providing the treatment?

What type of treatment is it (Inpatient, Residential, or Outpatient)?

If not covered by insurance, how can treatment be financed?

ALSO: If your employer has an EAP (Employee Assistance Program), you can call them for assistance in finding the most appropriate treatment facility or program.

.....

For additional information, call any one of the Newberg school counselors at 538-8361.

Newberg Schools

Drug
and
Alcohol

Student Assistance
Program

May 1986

STUDENT ASSISTANCE PROGRAM

It is recognized that the use and abuse of chemicals (drugs and/or alcohol) or dependency on them, interferes with the educational process with some students at school. Since the spring of 1984 a systematic and sensitive program that deals with this problem has been developed in the Newberg School District.

This program is called IMPACT. The purpose of the IMPACT program is to define the role of the schools in addressing the problems of chemical (drug and/or alcohol) use, abuse and dependence, and to develop and operate a program to accomplish that task. During the past 2½ years, a number of teachers, administrators, counselors, school board members, the school nurse, a police officer, parents and community members have been trained by the Adolescent Care Unit. This training consists of an intensive, week-long seminar put on by highly skilled professionals in the treatment field. The result is a group of people with the training and resources necessary to establish and operate our local program.

Since the beginning of the IMPACT program at Newberg High School on April 12, 1985, there have been 156 students referred to the team as of May 9, 1986. Of 156, 60 have been referred for assessment, 18 have gone through treatment. Eleven students have participated in the high school support group since September.

As parents, we often feel "it's somebody else's kid" who has problems with drugs or alcohol. But it could happen to anyone's son or daughter. That is why it is important for parents and concerned persons to know the signs that might indicate a problem:

- Increased absences and tardies in school
- Defiance of rules at home and school
- Attitude becomes more negative
- Verbally or physically abusive
- Loss of interest in their appearance — not just funky, faddish clothes, but lack of care
- Poor coordination, slurred or slow speech, change in sleep patterns or eating habits.
- Smelling of alcohol or pot
- Starts having problems with the law or money disappears in the home.

- Becomes more secretive; begins to withdraw from family activities
- Increased excuses / blaming others for problems; lying
- Minimizing the amount and frequency of drug and/or alcohol use
- Sudden drop in grades; change in study habits
- Dramatic mood swing ... more than normal "ups and downs"
- Begins associating with "older or younger crowd" or known drug users. Becomes withdrawn from friends; a loner or change of peer group.

DEFINITION OF ALCOHOL/ DRUG ABUSE AND TREATMENT TERMS

CHEMICAL DEPENDENCY: An illness referring to a harmful dependence upon mood-changing chemicals (alcohol and/or other drugs). Chemical dependency is primary, chronic, progressive, cannot be cured — only arrested, and can be fatal if not stopped. It is a "family illness" as the family begins to revolve around the chemically dependent person (by protecting, denying, etc.) whose life in turn revolves around the chemical.

SUBSTANCE ABUSE: Also refers to the excessive use of alcohol, drugs, or a combination of these.

ALCOHOLISM: (Chemical dependence with alcohol as the chemical.) A treatable, often fatal illness brought on by harmful dependence upon alcohol. It is physically and psychologically addictive. As a disease it is primary, chronic, progressive and often fatal.

ADDICTION: Refers to both the physical craving for a chemical and the psychological need — the chemical comes before **ALL** else in the person's life.

PREVENTION: Educating students, teachers, parents and community about the disease of chemical dependency through school curriculum and awareness programs.

INTERVENTION: A process which provides for gathering of information about a student's behavior and determining if those behaviors need further assessment.

- Student is referred to the IMPACT team by parents, teachers, or other concerned persons.
- Teacher response forms are sent out and returned to the IMPACT team.
- The IMPACT team evaluates the teacher responses and recommends a course of action.
- The parents or the student may be contacted regarding a recommended course of action.

(The IMPACT team is not trained to diagnose or treat the disease of chemical dependency, but recognizes the responsibility to provide information to parents about changes in a student's behavior.)

ASSESSMENT: An evaluation based on an intensive interview to determine the degree of drug/alcohol abuse or dependence. This evaluation will help to determine if the student has a problem with chemicals, the appropriate treatment and rehabilitation to overcome the problem. Family members should be involved in the assessment process. Assessments are performed by trained professionals outside the school district. Assessments usually do not involve testing of urine or blood for chemicals. They are often free of charge at treatment centers and some out-patient facilities.

AFTERCARE: Continuation of the recovery process is vital to the wellness of the student. This is accomplished by support groups and sometimes individual counseling.

Students are encouraged to attend after-care groups with the treatment center once a week for at least six weeks to six months.

Students are also encouraged to get involved in weekly AA (Alcoholics Anonymous) or NA (Narcotics Anonymous) groups in this area.

At Newberg High School, IMPACT members teach a support group one hour daily for students returning from treatment. Students are encouraged to work through programming, stay sober, and support one another as they adjust to home and school. Counselors also provide individual support for students and their families.

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Interviews

Joe Boutin, Dean of Students, Newberg High School, Newberg, Oregon.
Interview October 14, 1986.

Judie Caylor, Health Nurse, Newberg School District, Newberg, Oregon.
Interview October 14, 1986.

Lee Cook, Superintendent, Newberg School District, Newberg, Oregon.
Interview October 14, 1986.

Nancy Dorey, Teacher, Edwards Elementary School, Newberg, Oregon.
Interview October 14, 1986.

Marcia Garrick, Administrator, Newberg High School, Newberg, Oregon.
Interview October 14, 1986.

Susan Ibarra, P.E. Teacher, Newberg High School, Newberg, Oregon.
Interview October 14, 1986.

Tom Lynott, Counselor, Springbrook Middle School, Newberg, Oregon.
Interview October 14, 1986.

Ray Simonsen, Coordinator of Special Services, Curriculum, Newberg
School District, Newberg, Oregon. Interview October 14, 1986.

Mary Stewart, Counselor, Newberg High School, Newberg, Oregon, and
Chairperson Impact Team. Interview October 14, 1986.

Hal Stoltz, Counselor, Newberg High School, Newberg, Oregon. Interview
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